



1980'

5800'

Highway 62 & 180

Drill pad will be 300' square.

--- New Roads (12' wide with 9" caliche)
— Existing Roads

LA RICA UNIT #1
PROPOSED LOCATION
BELCO PETROLEUM CORPORATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0185
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM 24489
2. NAME OF OPERATOR Enron Oil & Gas Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 2267, Midland, Texas 79702	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 660' FWL of Section 13	8. FARM OR LEASE NAME La Rica Unit
14. PERMIT NO.	9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3692.9' GR	10. FIELD AND POOL, OR WILDCAT Tonto Seven Rivers
	11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA Sec. 13, T19S, R33E
	12. COUNTY OR PARISH Lea
	13. STATE NM

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Add 1 perfs & add Pumping Unit <input checked="" type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Additional Seven Rivers Perforations 3730-3750 (.44" 21 holes)
 Frac'd with 27,500 gal Versagel 1400 and 22,000# 20/40 sand and 32,200# 12/20 sand.
 2-7/8" tubing at 3771'.
 6-29-87 - Installed pumping unit (2-1/2" X 1-1/2" X 16' RWBC)
 May's production averaged 6 BOPD, 4 MCFPD, & 16 BWPD

18. I hereby certify that the foregoing is true and correct

SIGNED Betty Gildon TITLE Regulatory Analyst

DATE 9/16/87

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
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Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

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3. ADDRESS OF OPERATOR P. O. Box 2267, Midland, Texas 79702		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL & 660' FWL of Section 13		8. FARM OR LEASE NAME La Rica Unit
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.) 3692.9' GR	9. WELL NO. 1
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT Tonto Seven Rivers
		11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA Sec. 13, T19S, R33E
		12. COUNTY OR PARISH: 13. STATE Lea NM

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NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACURE TREAT

MULTIPLE COMPLETE

FRACURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other) Add'l perfs & add Pumping Unit

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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Betty Gildon
Betty Gildon

TITLE

Regulatory Analyst

DATE

9/16/87

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3. ADDRESS OF OPERATOR
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See also space 17 below.)
At surface
1980' FSL & 660' FWL of Section 13

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3692.9' GR

5. LEASE DESIGNATION AND SERIAL NO.
NM 24489

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
La Rica Unit

9. WELL NO.
1

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REPAIR WELL
(Other)
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CHANGE PLANS

SUBSEQUENT REPORT OF:

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FRACTURE TREATMENT
SHOOTING OR ACIDIZING
(Other) Add 1 perms & add Pumping Unit
REPAIRING WELL
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